**Application Number** 

10/019,190

PTO/SB/17 (01-06)(modified)
Approved for use through 07/31/2006, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL For FY 2006					Filing Date 03/13/2002			
					rst Named Invento		ibara et al.	
					caminer Name		inhung T. Nguyen	
					t Unit		2677	
Applicant claims small entity status. See 37 CFR 1.27							7 S013-US1	
TOTAL AMOUNT OF PA	YMENI	(\$) 450.00		A	torney Docket No.	IFC	3013-031	
METHOD OF PAYME	NT (check a	ll that apply)						
Check Credit (	Card	Money Order	None [	Other (plea	se identify):			
Deposit Account Deposit Account Number: 18-0560 Deposit Account Name: Tyco Electronics Corporation								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR 1.16 and 1.17								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
·	FILING F	FEES	SEARCH	FEES	EXAMINA <sup>*</sup>	TION FE	ES	
		<b>Small Entity</b>		Small Entity	L	Small E	ntity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (	\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0	<del></del>	
2. EXCESS CLAIM FEES Small Entity								
Fee Description Fee (\$)								
Each claim over 20 (including Reissues)							50 25	
Each independent claim over 3 (including Reissues)							200 100	
Multiple dependent claims							360 180 Dependent Claims	
							Fee Paid (\$)	
HP = highest number of t		aid for if greate	r than 20			Fee (\$)	ree Faiu (\$)	
	a Claims	Fee (\$)		aid (\$)				
$-3 \text{ or HP} = $ $\times$ $=$								
HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37								
CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35								
U.S.C. 41(a)(1)(G) and 3		` '						
	Sheets			al 50 or fractio		<u>Fee (\$)</u>	Fee Paid (\$)	
- 100 = 4. Other Fee(s)	_ / 50 =	(roun	d up to a who	ie number)	x	— <del>-</del>	Fees Paid (\$)	
Extension fee No Extension Fee							<u>rees Paid (\$)</u> N/A	
Other: Two-month extension fee for Reply							450.00	
Omer. I wo-monut ex	chaion ice i	or icepiy		•••			730,00	
SUBMITTED BY								
Registration No. (Attorney/Agent) Telephone								
							50-361-2483	
Name (Print/Type) Marguerite E. Gerstner							ate April 17, 2006	
Certificate of Mailing (37 CFR 1.8)								
I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the								
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below:								
Date of deposit:	April 1	17, 2006		Name (print	ed):	Margue	rite E. Gerstner	
	in the state of th							
Signature: Magnente E. Hersten								
	, O							